MOV 2 0 2014

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information.

1. Committee Information					
a. Full Name	-//-				c. ID Number
1,60	ley Hodge	e For C	LIERK of CON	URT_	MJ67F0
b. Mailing Address (include City, Stat	te and Zip Code)				d. Date Filed
1020 DARK	CORNER	ROAD			
1020 DARK ORDTO	ON, NC	28136	7		e. Phone Number
2. Report Year 3. Period Start				F Twonelly	TO DAY
2014 10/19	Date (minutally)	4. Periou i	and Date (mm/aa/yy)	LIS A	er Full Name DUNCAN
6. Type of Committee (Check O	one) 9. "	Type of Rer	oort (check only one	STATE OF STREET STATE OF STREET	ort from one category)
Candidate Campaign Part	ty Mu r	ınicipal	State/County		Referendum
	ferendum 🔲	Organizationa	al Organizati		Organizational
	nt Fundraiser	Thirty-five da			Pre-referendum
Legal Expense Fund	ID	Pre-primary	☐ First		Final
		Pre-election	☐ Secon	nd	Supplemental Final
7. Type of Fund (if applicable,	, check one)	Pre-runoff	Third		Annual
Booster Fund		Semi-annual	Fourt		Special
☐ Building Fund	<u> </u>	Mid Yea	1		
Signature Color Co	lo	Year End			10. Special Report Name
Other:	lo	Final	Year 1		To opecia repos
8. Number of Fundraisers this		Special	Final]	1
		-F	Special	J	1
44 1 Tuformation					
11. Account Information a. Financial Institution Full Name			11. Account Inform		
0 1 0 1	17212	1	a. Financial Institution I	Full Name	
	and TRUST	Co.			
b. Purpose	c. Account Code		b. Purpose		c. Account Code
	MBHC	nn.			
1 0000	1012	188 1878	1	J	
CAMPAIGN	d. Period Begin Bal	lance	A	1	d. Period Begin Balance
Olivii	\$		1)	\$
CERTIFICATION	Ψ.				Þ
	V	74101 T24			
I certify that the Committee or Fundament of the NC General Statutes and the	d is in computance	with all appu	cable provisions of Aru	icle 22A, 22B	& 22D-22M of Chapter 163
of the NC General Statutes and that	t no funds are com	mingled with	prohibited or other non	1-disclosed tur	nds. I further certify that this
report is complete, true and correct		en trained by	the NC State Board of	Elections.	1 ,
1 ICA DUI	NCAN	King	MIKIN	0011	- Illanlich
P1011	(.	1 114	M / JUI ~	Ker	11/20/17
Printed Name of Signe	er	, 21gi	nature of Appointed Treasu	ırer	/ Date
FOR OFFICE USE ONLY	20 11				The second second
Date Received:	-db-14	Employ	/ee:	_ D 1	ivery Method Normal Mail
Date Postmarked:		Employ	/ee:	- KU	Registered Mail Hand Delivered
Date Scanned:		Employ	/ee:		Electronically Filed
Date Data Entered:		Employ		- r	Signer has not received mandatory training
Please Note: This form can	anot be used to ar	mend comm	ittee information such	as the comr	mittee address, treasurer,
assistant t	treasurer, custodi	lian of books	s information, or accou	unt informati	ion.

Detailed Summary			Amendment
Use this form to summarize all disclosure reporting forms and t	o total mor	netary information	Yes No
2 Committee Full (value (and Fund it applicable)	2. Type of	Report 3.1	D Number
Madeane Bradley Hogge of Court	Fin	al l	
Start of Election Cycle: January 1, 2014		Total this Reporting Period	Total this
4) Cash on Hand at Start		\$ 525.98	Election Cycle
RECEIPTS.			<u> </u>
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$ 2773.00
6) Contributions from Individuals	(CRO-1210)	\$ 700.00	\$20 498 11
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 1000.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 77.	\$
11) Other Receipt Sources		*	3
11a) Interest on Bank Accounts	(CRO-1250)	\$	
11b) Contributions from Not-For-Profit Organizations		\$	\$
110 0-4-1 6	(CRO-1250)	\$	\$
11d) Local Process F. J. 60	(CRO-1270)		\$
14.17	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 1		\$ 5700 00	\$
EXPENDITURES	id and ite)	\$ 100.00	\$2421111
13) Disbursements			
13a) Operating Expenditures	CRO-1310)	\$ 225.88	\$4791.01
13b) Contributions to Candidates/Political Committees (5. 9.14	\$	10.01
13c) Coordinated De to Trans	CRO-1310)	\$	\$
	CRO-1315)		\$
15) I D.	CRO-1420)	\$	\$
16) Performed Marinel		\$	\$
17) In Vind Co. 4 12 4	CRO-1320)	\$ 510,60	\$2078,99
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	CRO-1510)	\$ 1225 03	\$ 12411,71
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr	not line 19	\$ 1233.93	\$ 2427 [7]
ADDITIONAL INFORMATION	det inte 16,	1 - 0 -	\$ 0-
20) NI - 35	CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	
22) Debts and Obligations owed by the Committee	CRO-1610)	\$	
22\ Dabéa I 011'	CRO-1620)	\$	
24) A cont TO C TYPE A C	CRO-1720)	\$	
25\ A Junitaria 15 \ 0	CRO-1710)	\$	\$
761 WARRINGS I Above	CRO-1440)	s	\$
27) 48-Hour Notice Reports Sum	(RO-2220)	S	\$
28) Contributions to be Refunded (C	RO-1215)	\$	\$
CRO-1100 NC State Board	of Elections		7

Con	tributions f	rom Individua	ıls	Po	los	1	Amendment Yes	Ø N	io.
Use thi	s form to report	individual contribution	ons over \$50 or o	ontributions und	ler \$50 if form C	RO 1	205 is not u	sed	ž
1. Con	imittee Full Na	me (and Fund If app	licable)	The Property Was		en Iraana	D Number		20.2
11/	adeane	Bradley A	bodge For	r Clerk o	of Court	-			
Property and the second state of the	tributor Inform	nation /			move				100
	lame, Mailing Addı de city, state, & zip		Deptember	b. Job Title/Profe	ssion	d, C	omments		
		Dalton	Batter Commission	Kefired c. Employer's Na	me/Specific Field				
				Educa	1				
Kui	Hertord	for no	28139	2 que	JUC		lection Sum to	Date	
				var , Or common mediation	Committee of the commit	\$	800.	00	
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. n	lark C	rowe Itm MC		c. Employer's Nan	ne/Specific Field				
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f. Prior	e Account Code	h. Form of Payment		Think is a like other to high bayeles, on the	Paradel XXXIII	100	200, "		
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	ime, Malling Addro e city, state, & zip)			b. Job Title/Profes	slon	d. Co	mments		
St	leve Ci	Itan MC 2		c. Employer's Nam	e/Specific Field				
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		h. Form of Payment		ion	j. Date (mm/dd/yyy	y)	c Amount		A BEG
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1. Tota	il only this Pa	age	name in a	U. D. A.		\$/	MAR	, nn	-
. Pot:	lofall Cr	O 1210 Pages				\$	000	100	-
(this lin	e must be on line 6	of Detailed Summary Pag	e CRO-1100)			Ψ	100,	00	

		ents From the Committe	-6 <u>-</u>	of <u>/</u> [mendn	Yes No	
1. Committee Full					2.	ID Number	
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mbili da bi lancini dallami	radiey	Hodge for Gerk C	TCOUT		1/1	JUHO	
3. Payee Information			Add Remove	《大学》中 《美国学			
a. Full Name, Mailing A			d. Type of Committee		h. (Original Receipt Date	
(include city, state, &		/ /	Candidate Referendum	PAC		11/11/14	
11.	RIL	tado e	e. Level Registered (Specif	Party	i. Original Receipt Amount		
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10 20 D	11 10		f. Purpose Code		j. E	lection Sum to Date	
Ry Her Co	rdten	todge Former Road MC 28139			\$	9108.99	
b. Job Title/Profession		c. Employer's Name/Specific Field	g. Comments		k. A	Account Code	
Office Star	A	Spindale Family	Close Acut	_			
I. Form of Payment	m. Required	Remarks		n. Date (mm/dd/y	ууу)	o. Amount	
BB4T	Retun	& for Shicks		11/14/14	/	\$ 510.60	
3. Payee Information	on		Add Remove	1 1			
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(include city, state, &	zip)		Candidate	PAC			
			Referendum	Party			
			e. Level Registered (Specif	· Contingues of the continues of the con	i. 0	riginal Receipt Amount	
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			ur pose code			Retion Sum to Date	
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(include city, state, &			d. Type of Committee Candidate	PAC	n. C	Original Receipt Date	
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			e. Level Registered (Specify		i. O	riginal Receipt Amount	
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4. Total only this Pa	l loe					:511	
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P* - Reimbursement o	of In-Kind	O* Other	LASSOCIO (- Managaron Dinin			

	/ Amendment
Disbursements	Pg / of J Yes No
	Committee or a second control of the

Distribution					Pg _ oi	Li Yes	E No
	o report expenditures t		ee for o	perating exp	penses, contributi	ions to candidate/poli	itical
	l coordinated party ex						
1. Committee	Full Name (and Fund	l if applicable)		1/	1 03	2. ID Number	
Madean	ie Bradley	Hodge 1	For	Clerk	t of Cour	rt	
3. Type of Dis	bursement (Please	use separate CR	0-1310	forms for e	each type of Dist	oursement.)	pate that
Operating Ex	penses	tributions to Candida	tcs/Politi	cal Committee	S ☐ C00	rdinated Party Expenditur	es
4. Payee Infor	mation			Add	Remove		註 经 值
a. Full Name, N	Mailing Address & Pho	one	u	b. Coordinat	ed Committee Nam	e d. Comments	er manner melki
(include city, state	e, & zip)	Section designation	196-11 (New)				
Chasa	e hims (f City V	Plub		c. Level Regi	stered (Specify)	\$1.03	
-		21-12		☐ Federal	County:		
1-ores	+ City V	l C		☐ State	Municipa	dity: e. Election Sum to	Date
	,	280 \$3				\$	
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			/	7-6-	\$		
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THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	Iling Address & Phone		1.15	b. Coordinat	ed Committee Name	e d. Comments	
(include city, st	ate, & zip)						
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	mu = 1010		10/-	417	72	CHP	100
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5. Total only t						\$/108	.00
Brain 24 Land Commission of the	L CRO-1310 Pages						
	n line 13a of Detailed Sum		10.70	2000 17 H		\$ 700	22
	n line 13b of Detailed Sum n line 13c of Detailed Sum					125	.33
-	Codes (List detailed			THE RESERVE OF THE PERSON NAMED IN COLUMN			
A* - Media	B* - Printin	ıg _.	C* - F	undraising		Another Candidate	
E - Salaries	F* - Equip			litical Party		olding Public Office	
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THE RESERVE THE PARTY OF THE PA	re detailed explanation	on in required r	emarks	field (k)	STATE SOUNDS EN		
CRO-1310		THE RESIDENCE OF THE PARTY OF T		rd of Elections			December 200

Dis	hm	rsei	nen	ts
D 10	vu.			L

Pg 2 of 3 Amendment No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee I	ull Name (and Fund	l if applicable)		PMIN TO THE			2. ID Number
Madean	e Bradley	Hodge	For	Clerk	t of Con	irt	
3. Type of Dish		use separate Ch					ement.)
Operating Exp	The same of the sa	tributions to Candida		The second secon	And the second section is a second section to the second section in the second section is a second section in the section in the second section is a section section in the section in the section is a section section in the section in the section is a section section in the section in the section is a section section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section in the section is a section in the section is a section in the		ated Party Expenditures
4. Payee Infort	nation			Add	Remove	W. 31	a that a
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(include city, state,			and the				
Ruth	er-ford Ne	2/4/4			CONTRACTOR OF THE PARTY OF THE	927.1	
(incl.	C1 1010 111			C. Level Regi	stered (Specify) County		
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4. Payee Inform	nation			Add	Remove	· ·	
D. Philippe in P. Lee Williams and July Book and the second second second	lng Address & Phone		H. G. C.	b. Coordinat	ed Committee Nar	ne	d. Comments
(include city, sta	te, & zlp)			- Anna Carlos Company	nyen diliku digilikun ing dayah dikuma ang adamat pin dalah ang		
Terril	1 Parton			SECURITION AND AND	Torrest Control Control	enda.	
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			1	/ /	\$	1	Rental
4. Payee Inform	nation	499	П	Add \square	Remove	Mubi	
The second secon	Ing Address & Phone		MH2E	b. Coordinate	ed Committee Nan	1e	d. Comments
(include city, sta	te, & zip)		Mar.				
Clan	loc			To the state of th	Mandaga et vest errores		
Stap	につ			c. Level Regi	stered (Specify)		
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	CRO-1310 Pages					100 I	4 1 100
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	line 13b of Detailed Sum					1)	\$
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7. Purpose Co	odes (List detailed o	expenditure code	in (h.)	above)			
A* - Media	B* - Printin	g	C* - Fu	indraising	D - To	Anot	her Candidate
E - Salaries	F* - Equipn			itical Party			g Public Office Expenses
1 - Postage O* Other	J - Penaltie	s	K* - O	ffice Expen	ses Q* - D	onati	on to Legal Expense Fund
	e detalled explanatio	n in required r	emarks	field (k)			
NAME OF TAXABLE PARTY.					the artists of the property of	THE RESERVE	

	The state and the state of the
Disbursements	Pg 3 or 3 Amendment No
Use this form to report expenditures from the committee for	Pg of Pyes No or operating expenses, contributions to candidate/political
committees and coordinated party expenditures	T
1. Committee Full Name (and Fund if applicable)	2. ID Number
Madeane Bradley Hodge Fo	r Clerk of Court
	10 forms for each type of Disbursement.)
Operating Expenses Contributions to Candidates/Po	Ditical Committees Coordinated Party Expenditures
4. Payee Information	Add Remove
a. Full Name, Mailing Address & Phone	b. Coordinated Committee Name d. Comments
(include city, state, & zip)	550. 1911
Shillip Holce	c. Level Registered (Specify)
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Kullentalton MC	State Municipality: e. Election Sum to Date
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14/2	Land And Sand
4. Payee Information	3
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(include city, state, & zip)	b. Coordinated Committee Name d. Comments
The state of the s	
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f. Account Code g. Form of Payment h. Purpose Code 1. Date 5. Total only this Page	Federal County: e. Election Sum to Date \$ c (mm/dd/yyyy) J. Amount k. Required Remarks \$ \$
5. Total only this Page	Federal County: e. Election Sum to Date \$ State Municipality: e. Election Sum to Date \$ the control of the county \$ the county County:
5. Total only this Page 6. Total of ALL CRO-1310 Pages	Federal County: e. Election Sum to Date \$
5. Total only this Page	Federal County: e. Election Sum to Date \$ In the county of the

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media

B* - Printing

C* - Fundraising

D - To Another Candidate

E - Salaries

F* - Equipment

J - Penalties

G - Political Party

I - Postage

O* Other

K* - Office Expenses

H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund

* Godes require detailed explanation in required remarks field (k) CRO-1310

NC State Board of Elections

December 2009



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director NOV 2 0 2014

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:	11 7 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Committee Name:	Madeane Bradley Hodge For Clerk of Court
Гreasurer Name:	Lisa Duncan
Γreasurer Address:	215 Dark Corner Road
include city, state, & zip)	Rutherfordton, Mc 28/39
Treasurer Phone:	828-429-1927

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

Date Stoned

Signature